COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT AND DESIGN APPLICATIONS
FOLLOWING:

ATTORNEY DOCKET NO. 1906-0116P

Insert Title

As a below named inventor, I hereby declare that: my residence post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: * Signal Statistics Determination

heck Box If								
ppropriate— or Use Without pecification titached	the specification of which is attached hereto unless one of the following boxes is checked:							
	The Specification was filed onand was assigned							
		and was amended						
	☐ was filed as PC	was filed as PCT international application number on on						
	(if applicable).							
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.							
	I acknowledge the duty to disclose information material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.							
	I do not know and do not believe the same was ever known or used in the United States of							
	America before my or our invention thereof, or patented or described in any printed publication in							
	any country before my or our invention thereof, or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year							
	prior to this application, that the invention has not been patented or made the subject of an							
	inventor's certificate issued before the date of this application in any country foreign to the United							
	States of America on an application filed by me or my legal representatives or assigns more than							
	or inventor's certificate or	twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States						
	of America prior to this application by me or my legal representatives or assigns, except as follows:							
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below:							
	Prior Foreign Application(s			Priority	Claimed			
sert Priority formation appropriate)	02254612.1 (Number)	Europe (Country)	01 July 2002 (Month/ Day/ Year Filed)	X) Yes	□ No			
		(6	(Manda Day V Filed)		□ No			
	(Number)	(Country)	(Month/ Day/ Year Filed)	Yes	.40			
	(Number)	(Country)	(Month/ Day, Year Filed)	Yes	Ро			
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	(Number)	(Country)	(Month/Day/Year Filed)	Yes	No			
	(Number)	(Country)	(Month/Day/Year Filed)	□ Yes	□ No			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More Than 12 Months (6 Months for Designs) Prior To The Filing Date of This Application:							
	Country	Application No.	Date of Filin	ig (Month/Day	· Year)			
	I hereby claim the benefit under Title 35, United States Code, §120. of any United States							
	application(s) listed below and, insofar as the subject matter of each of the claims of this application							
	is not disclosed in the prior United States application in the manner provided by the first paragraph							
	of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as							
	defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:							
	(Application Serial No.)	(Filing Date)	(Status — paten	ted, pending, a	bandoned)			
	(Application Carial Va.)	(Application Social No.) (Etting Dec) (Second		tad panding o	handoned)			
	(Application Serial No.)	(Filing Date)	(Status — paten	ica, penaing, a	nationing)			

I hereby appoint the following attorneys to prosecute this application and or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE			
Insert Name of Inventor Insert Date This Document Is Signed	Wieslaw Jerzy	SZAJNOWSKI	100/100	· .	12 August 2003			
Insert Residence Insert Citizenship	RESIDENCE City, State & Cou	ntry)	7 7,00	CITIZENSHIP				
insert Citizensnig	Guildford, Surrey, United Kingdom.			BRIDSH				
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Address	3 The Red House, West Road, Guildford, Surrey, GU1 2AR, United Kingdom.							
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see above				Tairing				
	RESIDENCE City State & Cou	ntry)		CITIZENSHIP				
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
.•	GIVEN NAME	FAMILY NAME INVENTOR'S SIGNATURE			·DATE			
Full Name of Third Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		5416			
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	RESIDENCE (City, State & Cou	intry)		CITIZENSHIP				
	POST OFFICE ADDRESS							
			Y		T			
Full Name of Fourth Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE			
see above								
	RESIDENCE (City, State & Country)		CITIZENSHIP					
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
Full Name of Fifth Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		.DATE			
see above								
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*Note: Must be completed								
- date this document is signed.	POST OFFICE ADDRESS (Complete Street Address) including City, state & Country.							
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(USPTO Approved 3:40) (Revised 1:93)								